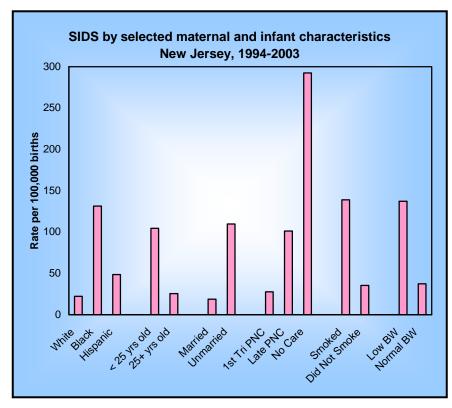


## HEALTH DATA FACT SHEET October 2006

## Sudden Infant Death Syndrome (SIDS)

- Sudden Infant Death Syndrome (SIDS), also known as crib death, is "the sudden death of an infant under 1 year of age, which remains unexplained after a thorough case investigation, including performance of a complete autopsy, examination of the death scene, and review of the clinical history."
- On average, 50 infants die in New Jersey each year because of SIDS. The number steadily decreased from 62 in 2000 to 38 in 2003.
- 93% of SIDS deaths occur in the postneonatal period, between 28 days and one year of life. SIDS is the leading cause of postneonatal death.
- SIDS is more likely among babies of younger mothers, unmarried mothers, mothers who received late or no prenatal care, mothers who smoked while pregnant, and among babies of low birth weight. SIDS is also more likely among infants of non-Hispanic black and Hispanic mothers who tend to have higher rates of many of the above risk factors.
- The SIDS rate has been on a steady decline nationally since 1994. In New Jersey, the rate has generally decreased despite an increase in 1999-2000. In 1994, the US and NJ rates were 107 and 61 deaths per 100,000 live births, respectively. The New Jersey rate has consistently been below the national rate and continues to remain so. By 2003, the rates had halved to 53 in the US as a whole and 33 in NJ.



In 1994, a national "Back to Sleep" educational campaign was begun to encourage placement of babies on their backs to sleep to reduce the risk of SIDS. Additionally, parents and other caregivers should place the baby on a firm mattress; remove soft, fluffy bedding and stuffed toys from the baby's sleep area; make sure the baby's head and face remain uncovered during sleep; and not let the baby get too warm during sleep.

- Among New Jersey mothers surveyed in 2002-2004, 59% placed their infants on their backs to sleep. By race/ethnicity, the proportions were 70% among whites, 39% among blacks, 46% among Hispanics, and 68% among Asians.
- To reduce the risk of SIDS, additional recommendations from the Back to Sleep Campaign include receiving early and medically recommended prenatal care; avoiding drugs, alcohol, and smoking during pregnancy; breastfeeding; maintaining regular well-baby health visits including recommended immunizations; and not allowing smoking around your baby. As of 2005, the American Academy of Pediatrics also recognized the hazards of co-sleeping or bed sharing, the benefits of infants using pacifiers and sleeping in the same room as adults, and that side sleeping is not a reasonable alternative to back sleeping.

For more mortality data from the New Jersey Department of Health and Senior Services: <a href="https://www.nj.gov/health/chs">www.nj.gov/health/chs</a>

For more infant sleep position and other SIDS risk factor data from the New Jersey Department of Health and Senior Services, Pregnancy Risk Assessment Monitoring System (PRAMS):

www.nj.gov/health/fhs/professional/prams.shtml

For more information about SIDS from the New Jersey Department of Health and Senior Services, Division of Family Health Services: <a href="https://www.nj.gov/health/fhs/newborn/sids.shtml">www.nj.gov/health/fhs/newborn/sids.shtml</a>

For services, educational programs, research, and special projects at the SIDS Center of New Jersey: <a href="https://www.cjsids.com/foundati.htm">www.cjsids.com/foundati.htm</a>

## Sources:

Willinger M, James LS, Catz C. <u>Defining the sudden infant death syndrome (SIDS): deliberations of an expert panel</u>
<a href="mailto:convened by the National Institute of Child Health and Human Development">Development</a>. Pediatr Pathol. 1991;11:677-684

New Jersey Department of Health and Senior Services, <u>Center for Health Statistics</u>:

New Jersey 1994-2003 Linked Birth/Infant Death Certificate Data Files and <u>NJSHAD Query System</u>

Singh GK, Kochanek KD, MacDorman MF. Advance Report of Final Mortality Statistics, 1994. MVSR; 45 (3), supp. Hyattsville, MD: NCHS, 1996.

Hoyert DL, et.al. <u>Deaths: Final Data for 2003</u>. NVSR; 54(13). Hyattsville, MD: NCHS, 2006.

Willinger M, et.al., <u>Factors associated with caregivers' choice of infant sleep position</u>, <u>1994-1998</u>: <u>The National Infant Sleep Position Study</u>. JAMA. 2000;283:2135-2142.

New Jersey Department of Health and Senior Services, Division of Family Health Services, <u>Pregnancy Risk Assessment Monitoring System (PRAMS)</u>: Newborn Sleep Position Survey Data, 2002-2004

The Changing Concept of Sudden Infant Death Syndrome: Diagnostic Coding Shifts, Controversies Regarding the Sleeping
Environment, and New Variables to Consider in Reducing Risk. Pediatrics. 2005;116:1245-1255

